FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Roberts David B  (Last) (First) (Middle)  C/O LEMAITRE VASCULAR, INC. 63 SECOND AVENUE  (Street)  BURLINGTON MA 01803  (City) (State) (Zip)						2. Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [LMAT]  3. Date of Earliest Transaction (Month/Day/Year) 03/10/2017  4. If Amendment, Date of Original Filed (Month/Day/Year)								Check X X	tionship of Reporting Person(s) to Issuer all applicable)  Director 10% Owner  Officer (give title Other (specify below) below)  President and Director  ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting Person			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Trans. Date (Month/L				. Transaction	2A. Deemed Execution Date, ir) if any (Month/Day/Yea		3 T C ar) 8	ransac	tion	4. Securities	posed Of (D) (Instr. 3, 4  (A) or (D)  (D)		d 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					·				<u> </u>							Д		
1. Title of 2. 3. Transaction 3A Derivative Conversion Date Ex Security or Exercise (Month/Day/Year) if a		3A. D Execu	(e.g., pu	ts, calls, wa  4. Transaction Code (Instr. 8)  A (A (A (I			mber ative rities ired osed	ts, option: oper 6. Date Expiration (Month/E) dd , 4		Year) Securities Underlying Derivative Security (Instr 3 and 4)  Expiration Amount of Numbro of		e and nt of tites lying tive ty (Instr. 4)	8. Pr of Deriv Secu (Inst			Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. The transaction was executed in multiple trades ranging from \$22.23 to \$22.61. The reporting person undertakes to provide to the issuer, any securityholder of the issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares and price at which the transaction was effected.

## Remarks:

/s/ Laurie A. Churchill, Attorney-in-fact 03/10/2017

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.